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Substitute for form 1449A/PTO			Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Application Number		
			Filing Date		
			First Named Inventor	Jegla, Timothy James	
			Art Unit		
			Examiner Name		
Sheet	1	of	3	Attorney Docket Number	018512-005920US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
TS	AA	US-5,710,019	01-1998	U et al.	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
TS	AB	EPO	WO 97/344442 31112	A	08-28-1997 8/1997	The Johns Hopkins University School of Medicine		<input type="checkbox"/>
TS	AC	EPO	WO 98/16185	A	4-23-98	NPS Pharmaceuticals, Inc.		<input type="checkbox"/>

Examiner Signature		Date Considered	02/24/06
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